

**BASKETBALL REGISTRATION****PLEASE PRINT FIRMLY**

NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE \_\_\_\_\_ BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PH. ( ) \_\_\_\_\_ SCHOOL \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

PARENT NAME \_\_\_\_\_ PARENT WORK PH. ( ) \_\_\_\_\_

DID YOU PLAY IN THE BASKETBALL PROGRAM LAST YEAR? ☐ YES ☐ NO

IF YES, NAME OF TEAM \_\_\_\_\_ COACH'S NAME \_\_\_\_\_

WHAT POSITION(S) DO YOU PLAY? \_\_\_\_\_

ARE YOU SIGNING UP WITH A FRIEND? ☐ YES ☐ NO IF YES, NAME OF FRIEND \_\_\_\_\_MY PARENT WILL HELP: ☐ COACH ☐ MANAGER ☐ SPONSOR

COMMENTS: \_\_\_\_\_

\*\*\*\*\***FOR OFFICE USE ONLY**\*\*\*\*\*

TEAM ASSIGNED TO: \_\_\_\_\_ COACH: \_\_\_\_\_ PH. \_\_\_\_\_

GOLDENROD – COACH'S COPY

BUFF – OFFICE COPY